

*Guidelines to Prepare an
Emergency Plan for
Assisted Living Facilities*

I. INTRODUCTION

Assisted Living facilities have inherent risks during emergencies not often encountered by other business models, due to the vulnerable population they serve. Emergency incidents are most commonly classified into four primary hazard categories: natural hazards, technological hazards, human hazards, and hazardous materials. The outcome of these events can dramatically alter care and housing of Assisted Living residents and requires adequate planning in advance to mitigate the impact these events can have.

- A. **Facility name** is licensed for # residents. The types of residents we care for are (memory care, elderly, traumatic brain injury).
Emergency contact.....
- B. Organization Chart (Succession Chart Attached)

II. REFERENCES

This emergency management plan was developed in accordance with the requirements for assisted living facilities as set forth in IDAPA 16.03.22.155 *Residential Care or Assisted Living Facilities in Idaho Emergency Preparedness Requirements*.

III. PREPAREDNESS AND RESPONSE

Facility name is vulnerable to fire, explosion, flood, earthquake, high wind, or other emergencies (explain other emergencies) Examples below

Fire both internal and external	Bomb Threat	Missing Resident/Elopement
Explosion	Utility Outage (including but not limited to power, water, gas)	Emergent Infectious Diseases
Severe Thunderstorm	Communication Loss	Staff Shortage
Tornado	Transportation disruption	Disgruntled Employee
Flooding	Hazardous Materials	Public Health Emergency
Extreme Weather Hot/Cold	Civil Disturbance	Supplies disruption
Earthquakes	Armed Intruder	
High Wind	Structural Collapse	

IV: NOTIFICATION PLAN

- A. Primary and alternate forms of notification if telephones or customary communication methods are disrupted, such as a messenger or runner.
- B. Primary/alternate facilities will be notified by telephone when possible or by messenger
- C. Resident responsible parties will be notified after arrival at primary/alternate facilities or by public announcements as to where their loved ones are housed. It will be policy to provide in advance families with the names and places where relatives will be accommodated during relocation.

V. EVACUATION PLAN

- A. (The person in charge) will be responsible for implementing the evacuation procedures.
- B. Transportation arrangements will be implemented as follows:
 - 1. Vehicle(s) provided
 - 2. Records, medication, food, water and other resources collected
- C. Time to evacuate residents to primary relocation facility is approximately ____ minutes, approximately ____ miles.
- D. Time to evacuate to alternate facility is approximately ____ minutes, approximately ____ miles

VI. EVACUATION ROUTE MAP

- A. Attached is a map of the evacuation routes to primary shelter.
- B. Attached is a map of the evacuation routes to alternate shelter.

SAMPLE

Facility Mutual Aid Agreement(s)

Primary/Alternate Facilities

Listing of community support agencies

This agreement is to provide a pre-arranged shelter agreement as may be needed in case of an emergency evacuation of residents and staff from (name of facility) with (alternate facility). This shelter agreement ensures the participating facilities provide adequate space and accommodations for all residents, resident needs and staff until the facility can be re-occupied.

(The sending facility name) agrees to provide emergency shelter during the time of a disaster

Name of Facility:	Number of licensed beds
Address	Types of residents housed
Administrator name	Phone
Signature	
Date	

(The receiving facility (name)) agrees to provide emergency shelter during the time of a disaster

Receiving Facility	Number of beds providing
Address	Type of residents supporting
Administrator name	Phone
Signature	
Date	